

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
IN AND FOR THE COUNTY OF MULTNOMAH

RILEY POOR,  
Plaintiff,  
vs.  
FRONTIER AIRLINES, INC.,  
Defendant

Case No. 1211-14843

SUMMONS

To: FRONTIER AIRLINES, INC.  
C/O CORPORATION SERVICE COMPANY  
285 LIBERTY ST. NE, SALEM, OR 97301

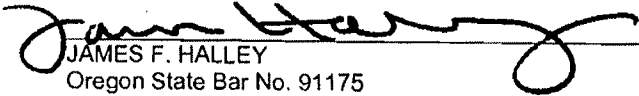
Defendant

You are required to appear and defend the complaint filed against you in this matter within thirty (30) days from the date of service of this summons upon you. If you fail to do so, plaintiff(s) will apply to the court for the relief demanded in the complaint.

**NOTICE TO DEFENDANT: READ THESE PAPERS CAREFULLY**

You must "appear" in this case or the other side will win automatically. To "appear" you must file with the court a legal paper called a "motion" or "answer." The "motion" or "answer" must be given to the court clerk or administrator within 30 days along with the required filing fee. It must be in proper form and have proof of service on the plaintiff's attorney or, if the plaintiff does not have an attorney, proof of service upon the plaintiff.

If you have any questions, you should see an attorney immediately. If you need help in finding an attorney, you may call the Oregon State Bar's Lawyer Referral Service at (503) 684-3763 or toll-free in Oregon at (800) 452-7636.

  
JAMES F. HALLEY  
Oregon State Bar No. 91175  
Attorney for Plaintiff and Trial Attorney

STATE OF OREGON, County of Multnomah) ss.

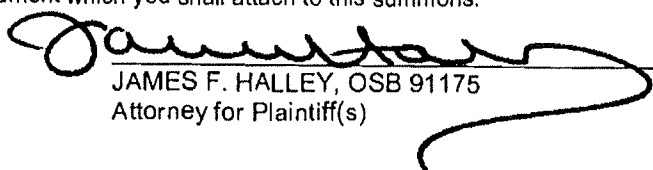
I, the undersigned attorney of record for the plaintiff, certify that the foregoing is an exact and complete copy of the original summons in the above-entitled action.

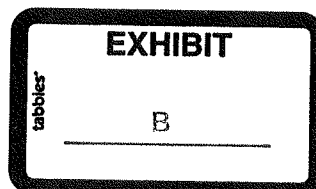
  
Attorney for Plaintiff(s)

**TO THE OFFICER OR OTHER PERSON SERVING THIS SUMMONS:**

You are directed to serve a true copy of this summons, together with a true copy of the complaint, upon the individual(s) or other legal entity(ies) to whom or which this summons is directed. You are further directed to make your proof of service on the reverse side of this summons or upon a separate similar document which you shall attach to this summons.

JAMES F. HALLEY, P.C.  
Attorney for Plaintiff(s)  
735 S. W. First Avenue, Second Floor  
Portland, Oregon 97204  
Telephone: (503) 295-0301  
FAX: (503) 228-6551

  
JAMES F. HALLEY, OSB 91175  
Attorney for Plaintiff(s)



## PROOF OF SERVICE

STATE OF OREGON            )  
   ) ss.  
 County of MULTNOMAH    )

I certify that I made service of the foregoing summons upon the individuals and other legal entities to be served, named below, by delivering or leaving true copies of said summons and the complaint mentioned therein, certified to be such by the attorney for the plaintiff, as follows:

Personal Service Upon Individual(s)

Upon \_\_\_\_\_, by delivering such true copy to him/her, personally and in person, at \_\_\_\_\_, on \_\_\_\_\_, 200\_\_\_\_\_, at \_\_\_\_\_ o'clock \_\_\_\_m.  
 Upon \_\_\_\_\_, by delivering such true copy to him/her, personally and in person, at \_\_\_\_\_, on \_\_\_\_\_, 200\_\_\_\_\_, at \_\_\_\_\_ o'clock \_\_\_\_m.

Substituted Service Upon Individual(s)\*\*

Upon \_\_\_\_\_, by delivering such true copy at his/her, dwelling house or usual place of abode, to-wit: \_\_\_\_\_, to \_\_\_\_\_, who is a person over the age of 14 years and a member of the household of the person served on the \_\_\_\_\_, 200\_\_\_\_\_, at \_\_\_\_\_ o'clock \_\_\_\_m.

Office Service upon Individual(s)\*\*

Upon \_\_\_\_\_, at the office which he/she maintains for the conduct of business at \_\_\_\_\_, by leaving such true copy with \_\_\_\_\_, the person who is apparently in charge, on \_\_\_\_\_, 200\_\_\_\_\_, during normal working hours, at to-wit: \_\_\_\_\_ o'clock, \_\_\_\_m.

Service on Corporations, Limited Partnerships or Unincorporated Associations Subject to Suit Under a Common Name

Upon \_\_\_\_\_, by  
 (NAME OF CORPORATION, LIMITED PARTNERSHIP, ETC.)  
 (a) delivering such true copy, personally and in person, to \_\_\_\_\_, who is a / the  
 \* \_\_\_\_\_ thereof; OR  
 (b) leaving such true copy with \_\_\_\_\_, the person who is apparently in charge of the  
 office of \_\_\_\_\_, who is a / the \* \_\_\_\_\_ thereof;  
 \* Specify registered agent, officer (by title), director, general partner, managing agent.

at \_\_\_\_\_, on \_\_\_\_\_, 200\_\_\_\_\_, at \_\_\_\_\_ o'clock \_\_\_\_m.

DATED: \_\_\_\_\_, 200\_\_\_\_\_,

\_\_\_\_\_  
 SHERIFF

BY: \_\_\_\_\_  
 DEPUTY

I further certify that I am a competent person 18 years of age or older and a resident of the state of service or the State of Oregon, and that I am not a party to nor an officer, director or employee of, nor attorney for any party, corporate or otherwise; that the person, firm or corporation served me is the identical person, firm or corporation named in the action.  
 DATED: \_\_\_\_\_, 200\_\_\_\_\_,

\_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 TYPE OR PRINT NAME

\_\_\_\_\_  
 ADDRESS

\_\_\_\_\_  
 Phone

The signature lines on the left should be used only by an Oregon county sheriff or deputy; all other servers complete certificate on the right.  
 \*\* In the event substituted or office service is made, mailing must be completed as soon as possible, and separate proof of mailing executed.